Image# 15970008640 PAGE 1 / 47

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

					Office Use Only	
NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼	Example: over the I	If typing, type nes.	12FE4M5		
American Academy of O	phthalmology I	nc Political Co	mmittee (OPH	THPAC)		1
ADDRESS (number and street)	655 Beach Street					
Check if different						
than previously reported. (ACC)	San Francisco			CA	94109	
2. FEC IDENTIFICATION NUM	BER ▼	CITY 🛦	:	STATE A	ZIP CODE	<b>\</b>
C C00196246		3. IS THIS REPORT	NEW (N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug	(Non-	20 (M11) Election Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep	(Non-	20 (M12) Election Only)
April 15		Apr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10) X Jan	31 (YE)
Quarterly Report (Q1)	(c) 12-Day	Prima	ry (12P)	General	12G) Run	off (12R)
July 15 Quarterly Report (Q2)	PRE-Electio Report for t		ention (12C)	Special (	128)	
October 15 Quarterly Report (Q3)		ш Ц	(120)	эрээлж (	,	
January 31 Year-End Report (YE)	E	Election on	M / D D /	Y Y Y	in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Electi		al (30G)	Runoff (3	0R) Spec	cial (30S)
Termination Report (TER)	Report for the		M / D D /	Y = Y = Y = Y	in the	
(TETT)	E	Election on			State of	
5. Covering Period 11 25 2014 through 12 31 2014						
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.						
Type or Print Name of Treasurer Steven Rausch						
Signature of Treasurer Steven R	ausch	[Electr	onically Filed]	Date 01	/ D D / Y D 12 20	Y Y Y Y Y 15
		•				
NOTE: Submission of false, erroneou	s, or incomplete infor	mation may subject t	he person signing th	nis Report to th	e penalties of 2 U.S.C	. §437g.
Office					FEC FORM :	3X
Use Only					Rev. 12/2004	]

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

25 2014 Report Covering the Period: 2014 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 450006.08 January 1, 2014 (b) Cash on Hand at 188713.09 Beginning of Reporting Period..... 696603.03 29251.22 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 217964.31 1146609.11 6(a) and 6(c) for Column B)..... 8642.62 937287.42 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 209321.69 209321.69 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

I. Receipts  ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	24521.78  24521.78  4729.44  29251.22	COLUMN B Calendar Year-to-Date  566488.53
Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	4729.44	
Than Political Committees  (i) Itemized (use Schedule A)	4729.44	
(ii) Itemized (use Schedule A)	4729.44	
(ii) Unitemized	4729.44	127614.50
Ciii) TOTAL (add Lines 11(a)(i) and (ii)		127614.50
Ciii) TOTAL (add Lines 11(a)(i) and (ii)		
Lines 11(a)(i) and (ii)▶  Political Party Committees	29251.22	
		694103.03
		0.00
	0.00	0.00
Other Political Committees	0.00	0.00
(such as PACs)  Total Contributions (add Lines		0.00
	29251.22	694103.03
sfers From Affiliated/Other		
Committees	0.00	0.00
F	0.00	
pans Received	0.00	0.00
Repayments Received	0.00	0.00
ets To Operating Expenditures	,	,
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	0.00	0.00
	0.00	2500.00
dends, Interest, etc.)	0.00	0.00
sfers from Non-Federal and Levin Funds	7	7 7
lon-Federal Account		
(from Schedule H3)	0.00	0.00
evin Funds (from Schedule H5)	0.00	0.00
otal Transfers (add 18(a) and 18(b))	0.00	0.00
	Totals to Line 33, page 5)	Totals to Line 33, page 5)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:      (a) Allocated Federal/Non-Federal	10101 11101	Calchaal Teal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	7	7 7		
Expenditures	142.62	1020.39		
(c) Total Operating Expenditures	142.62	1020.39		
(add 21(a)(i), (a)(ii), and (b))▶  . Transfers to Affiliated/Other Party	142.02	1020.39		
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees	2500.00			
and Other Political Committees	8500.00	602000.00		
Independent Expenditures (use Schedule E)	0.00	334183.70		
Coordinated Party Expenditures				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loan nepayments Made	3.50	3.00		
Loans Made	0.00	0.00		
(a) Individuals/Persons Other	0.00	83.33		
Than Political Committees	0.00	65.55		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	83.33		
Other Disbursements	0.00	0.00		
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(i) I odoral oriale				
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds	0.00	7		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Diaburaamanta (add Lines 01/a) 00				
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8642.62	937287.42		
	30-12-02	331201.42		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	0040.00	007007 40		
from Line 31)	8642.62	937287.42		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	29251.22	694103.03
4. Total Contribution Refunds (from Line 28(d))	0.00	83.33
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29251.22	694019.70
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	142.62	1020.39
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	142.62	1020.39

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE	6	OF	47				
	(check only one)									
	×	11a		11b		11c	12	2		
		13		14		15	16	6	17	

		atements may not be sold or used by any person name and address of any political committee to :	
	ME OF COMMITTEE (In Full)	, , ,	
\	, ,	ology Inc Political Committee (OP	PHTHPAC)
/			•
	l Name (Last, First, Middle Initial) tuart Anness		Date of Possint
	iling Address 1875 Forest View Ln		Date of Receipt
ivial	ming Address 10/3 Folest View Lit		12 19 2014
City	У	State Zip Code	Transaction ID : 6186B6D3-B9D2-4706-B
Cin	ncinnati	OH 45233-4965	Amount of Each Receipt this Period
	C ID number of contributing	C	250.00
fede	eral political committee.	9	255.55
Nar	me of Employer	Occupation	
Self		Ophthalmologist	
Rec	ceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) —	250.00	
	Other (specify) ▼	250.00	
Full	I Name (Last, First, Middle Initial)	+	
	pe Arterberry		Date of Receipt
Mai	iling Address 224 E Broadway, Suite 110		M = M / D = D / Y = Y = Y
Cit	,	State Zin Code	12 15 2014
City Lou	y uisville	State Zip Code KY 40202-2016	Transaction ID : 49711F91-0FEE-446E-9
			Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C	41.67
	•	Occupation	
Nar Self	me of Employer f	Occupation	
	ceipt For:	Ophthalmologist	
1100	Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	458.33	
	Name (Last, First, Middle Initial)		Data of Descipt
	auren Baker iling Address 345 E 53rd St		Date of Receipt
ivial	g , lad, 000 345 E 33[0 St		12 17 2014
City		State Zip Code	Transaction ID: 06AF9400-DC4F-496F-A
Mir	inneapolis	MN 55419-1431	Amount of Each Receipt this Period
	C ID number of contributing	C	1000.00
fede	eral political committee.	<u> </u>	.555,00
Nar	me of Employer	Occupation	
Self		Ophthalmologist	
Rec	ceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1500.00	
	Care (speediy) ▼	100.00	
SUBT	TOTAL of Receipts This Page (optional)	·····	1291.67
TA	M. This Devied Assessment	ah d	
TOTA	<b>AL</b> This Period (last page this line number o	nly)	

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Ivan Batlle Date of Receipt Mailing Address 9301 W 74th St. Suite 210 2014 City Zip Code State Transaction ID: A2D6E790-7ED8-49FA-8 KS Shawnee Mission 66204 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.03 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew Berman Date of Receipt Mailing Address 9630 N Kenton Ave 12 04 2014 City State Zip Code Transaction ID: CC9FF9E4-89A2-4C15-A IL Skokie 60076 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 730.00 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel Bernstein Date of Receipt Mailing Address 451 Ruin Creek Rd Ste 204 06 2014 City Zip Code State Transaction ID: 9E5383C1-1556-425D-8 NC Henderson 27536-5920 Amount of Each Receipt this Period FEC ID number of contributing 199.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 564.00 Other (specify) 605.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

l	FOR LINE NUMBER:			PAGE	8	OF	47		
l	(check only one)								
l	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may not be sold or used by any pers g the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Academy of Ophth	nalmology Inc Political Committee (C	PHTHPAC)
Full Name (Last, First, Middle Initial)  Bradley Black		Date of Receipt
Mailing Address 302 W 14th St		12 08 2014
City Jeffersonville	State Zip Code IN 47130-3717	Transaction ID : 3F088069-6540-421E-B
FEC ID number of contributing federal political committee.	C 4/130-3/1/	Amount of Each Receipt this Period  500.00
Name of Employer Self	Occupation Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  3. David Bogorad  Mailing Address 1120 15th St		Date of Receipt
Mailing Address 1120 15th St		11 30 2014
City	State Zip Code	Transaction ID: 17F795E6-30E1-43D9-B
Augusta  FEC ID number of contributing federal political committee.	GA 30912-0004	Amount of Each Receipt this Period  30.42
Name of Employer Self	Occupation Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  395.46	
Full Name (Last, First, Middle Initial)  C. David Bogorad		Date of Receipt
Mailing Address 1120 15th St		12 31 2014
City Augusta	State Zip Code GA 30912-0004	Transaction ID : EFB0F5FD-C22D-47D2-B Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.42
Name of Employer	Occupation	-
Self	Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  395.46	
SUBTOTAL of Receipts This Page (optiona	I)	560.84
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: **PAGE** 9 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) David Boyer Date of Receipt Mailing Address 1127 Wilshire Blvd Ste 1620 2014 City Zip Code State Transaction ID: BACD0535-159E-40A5-A CA Los Angeles 90017-4007 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.64 Other (specify) Full Name (Last, First, Middle Initial) B. William Bridges Jr. Date of Receipt Mailing Address 21 Medical Park Dr 11 30 2014 City State Zip Code Transaction ID: FF2D0A8A-BE27-4FE6-9 NC Asheville 28803-2493 Amount of Each Receipt this Period FEC ID number of contributing 111.08 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.24 Other (specify) Full Name (Last, First, Middle Initial) c. William Bridges Jr. Date of Receipt Mailing Address 21 Medical Park Dr 31 2014 City Zip Code State Transaction ID: ADCBFDB6-AAF6-4CE0-A NC Asheville 28803-2493 Amount of Each Receipt this Period FEC ID number of contributing 111.08 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.24 Other (specify) 305.49 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)       X     11a     11b     11c     12       13     14     15     16     17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Political Committee (	OPHTHPAC)
Receipt For:  Primary  General  Other (specify) ▼  Aggreg	40223	Date of Receipt  11 30 2014  Transaction ID: CBEBF051-9652-4560-A  Amount of Each Receipt this Period  83.33
Descipt For	40223	Date of Receipt  12 31 2014  Transaction ID: 8447EEA8-D40C-4997-8  Amount of Each Receipt this Period  83.33
Possint For:	56308-3477	Date of Receipt  11 30 2014  Transaction ID: BD22F3B0-6528-45DF-8  Amount of Each Receipt this Period  30.42
SUBTOTAL of Receipts This Page (optional)		197.08

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Kent Carlson Date of Receipt Mailing Address 3401 S Broadway 2014 31 City Zip Code State Transaction ID: E6166C52-BA79-4F38-B MN Alexandria 56308-3477 Amount of Each Receipt this Period FEC ID number of contributing C 30.42 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 273.78 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew Choy Date of Receipt Mailing Address 4100 Long Beach Blvd Ste 108 12 18 2014 City State Zip Code Transaction ID: 59E37EE0-E6BA-4998-9 CA Long Beach 90807-2696 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) Joanne Cochrane Date of Receipt Mailing Address 2981 Olive Hwy 04 2014 City Zip Code State Transaction ID: 482CCD19-D2D7-49FB-B CA Oroville 95966 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 695.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Frank Cotter Date of Receipt Mailing Address PO Box 1789 30 2014 City Zip Code State Transaction ID: 838B30B6-2333-440A-B Roanoke VA 24008-1789 Amount of Each Receipt this Period FEC ID number of contributing 166.66 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Croley III Date of Receipt Mailing Address 613 Del Prado Blvd 12 15 2014 City State Zip Code Transaction ID: 2AB13369-EC71-4DEA-B Cape Coral FL 33990 Amount of Each Receipt this Period FEC ID number of contributing 166.66 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 749.97 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Davenport Date of Receipt Mailing Address 2424 S 90th St Ste 204 15 2014 City Zip Code State Transaction ID: 4F3B92CE-CA77-4AD5-B WI West Allis 53227-2455 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 823.37 Other (specify) 374.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	:   PAGI	E 13 (	<b>)</b>  -
Use separate schedule(s)	(check onl	y one)			
for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	
	13	14	15	16	Г

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commendate purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Name (Last, First, Middle Initial)  Joseph Doe  Mailing Address 1052 Gull Rd  City  State  Zip Code  Mill 49048-1734  Amount of Employer  General  Ophthalmologist  Receipt For:  Primary  General  Ophthalmologist  FEC (ID number of contributing federal political committee)  City  State  Zip Code  Amount of Each Receipt this Period  Auount of Each Receipt this Period  Amount of Each Receipt for:  Good1-3465  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each Receipt this Period  Transaction ID: 1862A953A-8603-2238-8  Amount of Each			1.0 1.0
NAME OF COMMITTEE (in Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Name (Last, First, Middle Initial) Joseph Doe Mailing Address 1052 Gull Rd  City State Zip Code Kalamazoo Mil 49048-1734  FEC ID number of contributing federal political committee.  Cocupation Ophthalmologist  Full Name (Last, First, Middle Initial) Jordan Address 125 Secret Lake Rd  City Avon CT 06001-3465  FEC ID number of contributing federal political committee.  City Avon CT 06001-3465  FEC ID number of contributing federal political committee.  Cocupation Ophthalmologist  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Cocupation Ophthalmologist  FEC ID number of contributing federal political committee.  City Other (specify) ▼ State Zip Code Other (specify) ▼ Aggregate Year-to-Date ▼			
Augregate Year-to-Date ▼    City	,	almology Inc Political Committee (C	PHTHPAC)
Milliam Ehlers  Mailing Address 125 Secret Lake Rd  City State Zip Code CT 06001-3465  FEC ID number of contributing federal political committee.  Name of Employer Self Primary General City Aggregate Year-to-Date ▼  City Aggregate Year-to-Date ▼  City State Zip Code CT 06001-3465  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  City State Zip Code WW 26505-1704  Date of Receipt  Transaction ID: B62A953A-E6C3-4238-8  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: B62A953A-E6C3-4238-8  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: B62A953A-E6C3-4238-8  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: B62A953A-E6C3-4238-8  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: D804D8A9-ECDC-473D-9  Amount of Each Receipt this Period  Transaction ID: D804D8A9-ECDC-473D-9  Amount of Each Receipt this Period  Transaction ID: D804D8A9-ECDC-473D-9  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Ophthalmologist  Aggregate Year-to-Date ▼  Ophthalmologist  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼	Mailing Address 1052 Gull Rd  City Kalamazoo  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For: Primary General	MI 49048-1734  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼	12 15 2014  Transaction ID : 7E955B22-66B8-4076-9  Amount of Each Receipt this Period
Mailing Address 2000 Hampton Ctr Ste D  City     State Zip Code     Morgantown  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For:     Primary     Other (specify) ▼  Date of Receipt  Mailing Address 2000 Hampton Ctr Ste D  Transaction ID: D804D8A9-ECDC-473D-9  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  12 29 2014  Transaction ID: D804D8A9-ECDC-473D-9  Amount of Each Receipt this Period  365.00	Mailing Address 125 Secret Lake Rd  City Avon  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary General	CT 06001-3465  C Occupation Ophthalmologist Aggregate Year-to-Date ▼	12 15 2014  Transaction ID: B62A953A-E6C3-4238-8  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	City Morgantown  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For: Primary  General	WV 26505-1704  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼	12 29 2014  Transaction ID : D804D8A9-ECDC-473D-9  Amount of Each Receipt this Period
TOTAL This Period (last page this line number only)		·	448.34

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 14 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name as		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Political Committee (	OPHTHPAC)
Pagaint For:	93291-5121	Date of Receipt  11 30 2014  Transaction ID: 8192256F-F275-464A-9  Amount of Each Receipt this Period  83.33
Pagaint For:	93291-5121	Date of Receipt  12 31 2014  Transaction ID: E718E80-4588-4468-8  Amount of Each Receipt this Period  83.33
Possint For:	19148-1536	Date of Receipt  12
SUBTOTAL of Receipts This Page (optional)		208.33

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Detailed Summary Page		X	11a		11b		11c		12	_	_
			13		14		15		16		17

17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) James Finegan Date of Receipt Mailing Address 236 Roseberry St 2014 City State Zip Code Transaction ID: 227DD0AE-318F-492F-9 Phillipsburg NJ 08865 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.64 Other (specify) Full Name (Last, First, Middle Initial) B. James Finegan Date of Receipt Mailing Address 236 Roseberry St 12 31 2014 City State Zip Code Transaction ID: E1FF68DE-5D80-4E88-8 NJ Phillipsburg 08865 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.64 Other (specify) Full Name (Last, First, Middle Initial) c. Sidney Gicheru Date of Receipt Mailing Address 4385 San Carlos Drive 15 2014 City Zip Code State Transaction ID: D5C35E93-6C44-431A-9 **Dallas** TX 75205 Amount of Each Receipt this Period FEC ID number of contributing 208.33 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1874.97 Other (specify)

FEC Schedule A (Form 3X) Rev. 02/2003

374.99

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Michael Gilbert Date of Receipt Mailing Address 12301 NE 10th PI Ste 200 2014 City Zip Code State Transaction ID: 6C082188-2867-41C4-B WA Bellevue 98005-2487 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 749.97 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher Gualtieri Date of Receipt Mailing Address 3969 4th Ave Ste 300 12 15 2014 City State Zip Code Transaction ID: 863C0950-48D4-47AE-9 CA San Diego 92103-3165 Amount of Each Receipt this Period FEC ID number of contributing 30.42 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 212.94 Other (specify) Full Name (Last, First, Middle Initial) **c.** Vamsi Gullapalli Date of Receipt Mailing Address 600 Pavonia Ave Ste 6 30 2014 City Zip Code State Transaction ID: 95CF32BA-E3B3-47D8-B NJ Jersey City 07306-2932 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 213.75 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15	$\neg$	16		117

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NAME OF COMMITTEE (In Full)  American Academy of Ophthal	mology Inc Political Committee (O	PHTHPAC)
Full Name (Last, First, Middle Initial)  Vamsi Gullapalli  Mailing Address 2330 Troop Drive  Suite 104  City  Sartell  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  General  Other (specify)	State Zip Code MN 56377  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  600.00	Date of Receipt  12 31 2014  Transaction ID: D80680AB-6A1F-4B02-B  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial)  Jean Hausheer  Mailing Address 29 NW Burr Oak Dr  City  Lawton  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary  General  Other (specify)	State Zip Code OK 73507-8923  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  12 15 2014  Transaction ID: 4BDEE260-0043-4BA4-8  Amount of Each Receipt this Period  41.67
Full Name (Last, First, Middle Initial)  Gary Hirshfield  Mailing Address 11 Hillside Ave  City Port Washington  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  Other (specify)	State Zip Code NY 11050-2723  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  875.03	Date of Receipt  12 31 2014  Transaction ID: 509BE022-CBE1-4018-B  Amount of Each Receipt this Period  41.67
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	183.34
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) G. Baker Hubbard Date of Receipt Mailing Address 1365B Clifton Rd NE Ste B4401 2014 City Zip Code State Transaction ID: B769BC57-95E8-4CA7-8 GA Atlanta 30322-1013 Amount of Each Receipt this Period FEC ID number of contributing 2.08 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 435.38 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Janigian Date of Receipt Mailing Address 120 Dudley St Ste 303 11 30 2014 City State Zip Code Transaction ID: 904D6634-ABB7-42E6-B RΙ Providence 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 391.63 Other (specify) Full Name (Last, First, Middle Initial) **c.** Robert Janigian Date of Receipt Mailing Address 120 Dudley St Ste 303 31 2014 City Zip Code State Transaction ID: 57B22867-0345-42BE-9 RΙ Providence 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 391.63 Other (specify) 102.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Jaime Jimenez-Agosto Date of Receipt Mailing Address 1420 S 28th Ave 2014 City Zip Code State Transaction ID: BE30C692-6B06-4B11-8 MS Hattiesburg 39402-3107 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Leslie Jones Date of Receipt Mailing Address 8477 Indian Paintbrush Way 11 30 2014 City State Zip Code Transaction ID: 50A99A95-485B-4BDD-8 VA Lorton 22079-5610 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 458.37 Other (specify) Full Name (Last, First, Middle Initial) Leslie Jones Date of Receipt Mailing Address 8477 Indian Paintbrush Way 15 2014 City Zip Code State Transaction ID: 7D7218DE-79A5-46EA-8 Lorton VA 22079-5610 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 458.37 Other (specify) 1083.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Henry Kaplan Date of Receipt Mailing Address 301 E Muhammad Ali Blvd 2014 City Zip Code State Transaction ID: CF27E62E-F2DA-45A1-8 Louisville KY 40202-1511 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 541.67 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth Kato Date of Receipt Mailing Address 2020 Fleischmann Rd 12 15 2014 City State Zip Code Transaction ID: 59B111DF-8693-4BC4-B FL Tallahassee 32308-4599 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1041.67 Other (specify) Full Name (Last, First, Middle Initial) c. Peter Kelly Date of Receipt Mailing Address 1504 N Main St 80 2014 City State Zip Code Transaction ID: 0095E515-B57C-4D1E-8 MA Palmer 01069-1215 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

583.34

SUBTOTAL of Receipts This Page (optional).....

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,		13		14		15		16		71

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Laura King Date of Receipt Mailing Address 225 N Columbus Dr Apt 6705 30 2014 City State Zip Code Transaction ID: 587B27CB-2D7B-4737-8 Chicago IL 60601-7910 Amount of Each Receipt this Period FEC ID number of contributing C 30.42 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 304.20 Other (specify) Full Name (Last, First, Middle Initial) B. Laura King Date of Receipt Mailing Address 225 N Columbus Dr Apt 6705 12 31 2014 City State Zip Code Transaction ID: 841D864C-950F-4E68-A IL 60601-7910 Chicago Amount of Each Receipt this Period FEC ID number of contributing 30.42 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 304.20 Other (specify) Full Name (Last, First, Middle Initial) **c.** Judith Kirby Date of Receipt Mailing Address 4209 Bordeaux Ave 15 2014 City Zip Code State Transaction ID: D68810AE-7A81-4F8A-9 TX **Dallas** 75205 Amount of Each Receipt this Period FEC ID number of contributing C 41.67 federal political committee. Name of Employer Occupation Ophthalmologist Self Receipt For: Aggregate Year-to-Date ▼ Primary General 750.04 Other (specify)

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### SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolog	y Inc Political Committee (	OPHTHPAC)
Self Ophth	'	Date of Receipt  12 15 2014  Transaction ID: 40DA7526-30C3-4FF4-9  Amount of Each Receipt this Period  41.67
Self Ophth	'	Date of Receipt  11 30 2014  Transaction ID: 07EF8182-9387-4EE6-B  Amount of Each Receipt this Period  30.42
Self Ophth	•	Date of Receipt  12 31 2014  Transaction ID: 3D2731EF-FE5E-4561-9  Amount of Each Receipt this Period  30.42
SUBTOTAL of Receipts This Page (optional)		102.51

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Academy of Ophthalr	nology Inc Political Committee (	OPHTHPAC)
Full Name (Last, First, Middle Initial) Scott Lanoux  Mailing Address 4324 Veterans Blvd Suite 107  City Metairie  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For: Primary General Other (specify)	State Zip Code LA 70006  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼	Date of Receipt  12 03 2014  Transaction ID: 3DCB1834-7D74-46B2-8  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Janice Law  Mailing Address 2311 Pierce Ave  City  Nashville  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  General  Other (specify)	State Zip Code TN 37232-8808  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  375.03	Date of Receipt  12
Full Name (Last, First, Middle Initial)  Todd Long  Mailing Address 799 Gilliams Mountain Rd  City Charlottesville  FEC ID number of contributing federal political committee.  Name of Employer  Self Receipt For:  Primary General Other (specify)	State Zip Code VA 22903-9731  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  250.00	Date of Receipt  12 04 2014  Transaction ID: 286DCAD1-4B1D-4B4A-8  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)		791.67
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Brian Lueth Date of Receipt Mailing Address 3930 Hoyt Ave 2014 02 City Zip Code State Transaction ID: 0E5201EB-711B-4389-9 WA 98201-6200 Everett Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ben Mahan Date of Receipt Mailing Address 926 N Jackson St 12 31 2014 City State Zip Code Transaction ID: 9A548C43-C344-4D5F-A TN Tullahoma 37388-2300 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 815.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ahad Mahootchi Date of Receipt Mailing Address PO Box 1059 15 2014 City State Zip Code Transaction ID: 8DE1E549-CC6E-46FB-B FL Zephyrhills 33539-1059 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) 591.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full)	,,	
	Imology Inc Political Committee (Ol	PHTHPAC)
Full Name (Last, First, Middle Initial)  Masud Malik		Date of Receipt
Mailing Address 3865 N Mulford Rd		11 30 2014
City	State Zip Code	Transaction ID : A09D5EED-8DCB-4C80-A
Rockford	IL 61114-5603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	†
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial)  3. Masud Malik		Date of Receipt
Mailing Address 3865 N Mulford Rd		12 31 2014
City	State Zip Code	Transaction ID : 2231A8CF-7490-451E-9
Rockford	IL 61114-5603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	41.67
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial)  Sam Edward Mansour		Date of Receipt
Mailing Address 20 Rock Pointe Ln Ste 201		12 15 2014
City	State Zip Code	Transaction ID : AEB6C73D-4FDE-4230-8
Warrenton	VA 20186-2680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		183.34
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Alan Marks Date of Receipt Mailing Address 1981 Marcus Ave Ste E115 04 2014 City Zip Code State Transaction ID: 3563F0C2-CB80-403C-8 NY Lake Success 11042-2060 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jose Agustin Martinez Date of Receipt Mailing Address 801 W 38th St Ste 200 12 15 2014 City State Zip Code Transaction ID: 5004F275-C99F-4E51-9 TX Austin 78705-1169 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Benjamin Mason Date of Receipt Mailing Address 3108 Waterbury Dr 15 2014 City State Zip Code Transaction ID: D2B96E32-89CC-4B00-A IA Cedar Falls 50613-1514 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.03 Other (specify) 656.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Other (specify)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Scott Massios Date of Receipt Mailing Address 530 By Pass 123 Ste C 2014 City State Zip Code Transaction ID: 021D9F38-738F-49D5-8 SC Seneca 29678-0859 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Melendez Date of Receipt Mailing Address 735 Grey Hawk Dr NE 12 15 2014 City State Zip Code Transaction ID: AB38106D-DBD5-466C-9 NM Rio Rancho 87144-4709 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 503.63 Other (specify) Full Name (Last, First, Middle Initial) c. Peter Menger Date of Receipt Mailing Address 7809 Myrtle Ave 04 2014 City Zip Code State Transaction ID: EF641D8E-676D-434D-9 NY Glendale 11385-7439 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)	-	7	-		7	-		92.0	U	
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500.00

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Michael Edward Edward Migliori Date of Receipt Mailing Address 120 Dudley St Ste 301 30 2014 City Zip Code State Transaction ID: 4052E9DC-E980-4CFA-9 RΙ Providence 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 583.35 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Edward Edward Migliori Date of Receipt Mailing Address 120 Dudley St Ste 301 12 31 2014 City State Zip Code Transaction ID: F6C67A5A-D99A-4042-9 Providence RΙ 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 583.35 Other (specify) Full Name (Last, First, Middle Initial) **c.** Aaron Miller Date of Receipt Mailing Address 31 S Almondell Way 30 2014 City Zip Code State Transaction ID: 48235871-C8A3-434C-A TX The Woodlands 77354 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1433.32 Other (specify) 266.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Kamal Nassif Date of Receipt Mailing Address 2300 N Mayfair Rd Ste 1155 2014 City Zip Code State Transaction ID: 4C55D2DC-E822-49AC-8 WI Milwaukee 53226-1553 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Patrick O'Neill Date of Receipt Mailing Address 3054 Fairfield Avenue 12 03 2014 City State Zip Code Transaction ID: B796E584-D022-4245-B OH Cincinnati 45206 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Ozog Date of Receipt Mailing Address 1417 9th St S Ste 100 30 2014 City Zip Code State Transaction ID: 67175C92-82FA-4DC5-9 MT **Great Falls** 59405-4509 Amount of Each Receipt this Period FEC ID number of contributing 30.42 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 304.20 Other (specify) 1530.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13		14		15		16		117

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  American Academy of Ophthali	mology Inc Political Committee (O	PHTHPAC)
Full Name (Last, First, Middle Initial)  Mark Ozog  Mailing Address 1417 9th St S Ste 100  City Great Falls  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For:  Primary General Other (specify)	State Zip Code MT 59405-4509  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  304.20	Date of Receipt  12 31 2014  Transaction ID: 9BB65411-D8FF-417C-8  Amount of Each Receipt this Period  30.42
Full Name (Last, First, Middle Initial)  Philip Paden  Mailing Address 221 W Stewart Ave Ste 110  City  Medford  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary  General  Other (specify)	State Zip Code OR 97501-3647  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  365.00	Date of Receipt  12 29 2014  Transaction ID: A10829AF-8B8A-499B-A  Amount of Each Receipt this Period  365.00
Full Name (Last, First, Middle Initial)  Javier Perez  Mailing Address 100 N Dean Road, Suite 200  City Orlando  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For: Primary General Other (specify)	State Zip Code FL 32825  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  564.00	Date of Receipt  12 2014  Transaction ID: F9E33648-B2AA-4064-9  Amount of Each Receipt this Period  365.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	760.42
TOTAL This Period (last page this line number	only)	

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OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Nelson Preschel Date of Receipt Mailing Address 17900 NW 5th St Ste 204 08 2014 City Zip Code State Transaction ID: 5BA0FAD5-00D5-431A-8 FL Pembroke Pines 33029-2809 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Quayle Date of Receipt Mailing Address 2855 Gramercy St 12 80 2014 City State Zip Code Transaction ID: 671C8CC6-FDE3-417E-A TX Houston 77025-1697 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 465.00 Other (specify) Full Name (Last, First, Middle Initial) Jeffrey Rinkoff Date of Receipt Mailing Address 748 State St 04 2014 City Zip Code State Transaction ID: 6D8984AA-1365-42D1-A OR Medford 97504 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Philip Rizzuto Date of Receipt Mailing Address 120 Dudley St Ste 301 30 2014 City State Zip Code Transaction ID: AB78EDFC-8031-49FB-8 RΙ Providence 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Philip Rizzuto Date of Receipt Mailing Address 120 Dudley St Ste 301 12 31 2014 City State Zip Code Transaction ID: 6B0ABD33-9B8F-4C37-8 RΙ Providence 02905-2429 Amount of Each Receipt this Period FEC ID number of contributing 41.63 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carey Robinson Date of Receipt Mailing Address 1960 Electric Rd 05 2014 City Zip Code State Transaction ID: 0CAEE529-BDD6-4A59-A Roanoke VA 24018-1601 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 383.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Steven Rosenfeld Date of Receipt Mailing Address 16201 S Military Trl 2014 City State Zip Code Transaction ID: 15619FBE-6E72-4369-8 FL **Delray Beach** 33484-6503 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 730.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian Paul Roth Date of Receipt Mailing Address 1022 West Ivy 12 04 2014 City State Zip Code Transaction ID: 6E661DB6-3A31-446D-8 WA Moses Lake 98837 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Ruckman Date of Receipt Mailing Address 2 Medical Center Blvd 15 2014 City Zip Code State Transaction ID: AD156F10-AA04-4611-8 Lufkin TX 75904-3175 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1115.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Ralph Sando Jr. Date of Receipt Mailing Address 26 Sugar Knoll Drive 2014 City Zip Code State Transaction ID: E89410B3-B63B-46A1-8 PΑ Devon 19333 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gerald Schultz Date of Receipt Mailing Address 81893 Doctor Carreon Blvd Ste 2 12 04 2014 City State Zip Code Transaction ID: C24314D7-14D4-420F-A CA Indio 92201-5592 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gary Schwartz Date of Receipt Mailing Address 10356 Tapestry Bend 15 2014 City Zip Code State Transaction ID: A3396886-6DF2-4518-9 MN St Paul 55042-6006 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1365.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Rebeca Segura-Robins Date of Receipt Mailing Address 2462 Harvard Cir 04 2014 City Zip Code State Transaction ID: 1B8273EC-74A9-44E8-9 CA Walnut Creek 94597-3000 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Angana Shah Date of Receipt Mailing Address 32 Belamour Dr 12 15 2014 City State Zip Code Transaction ID: 0558CBFC-3EDA-4154-A PA Washington Crossin 18977 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Debra Shetlar Date of Receipt Mailing Address 2002 Holcombe Blvd Ste 112C 16 2014 City Zip Code State Transaction ID: EB05C008-D69F-4ACB-9 TX Houston 77030-4211 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 615.00 Other (specify) 740.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13	14		15	16	17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Ophthalr	mology Inc Political Committee (OF	PHTHPAC)
Full Name (Last, First, Middle Initial)  R. Michael Siatkowski  Mailing Address 608 Stanton L Young Blvd  City Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary General Other (specify)	State Zip Code OK 73104-5065  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  730.00	Date of Receipt  12 04 2014  Transaction ID: 14070B85-64A0-4E38-8  Amount of Each Receipt this Period  365.00
Full Name (Last, First, Middle Initial)  Steven Sicher  Mailing Address 230 W. Detweiller Dr.  City Peoria  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General Other (specify)   Other (specify)	State Zip Code IL 61615  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M / 21 2014  Transaction ID: 4550C5FD-6474-471E-A  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial)  Bonnie Silverman  Mailing Address 475 Tuckahoe Rd Ste 203  City Yonkers  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary General Other (specify)	State Zip Code NY 10710-5716  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  212.94	Date of Receipt  12 31 2014  Transaction ID: 3521818B-133B-42CD-B  Amount of Each Receipt this Period  30.42
SUBTOTAL of Receipts This Page (optional)	·····	1395.42
TOTAL This Period (last page this line number	only)	

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Mitchell Brian Stein Date of Receipt Mailing Address 69 S Moger Ave 2014 City Zip Code State Transaction ID: 490AC590-76EF-4891-8 NY Mount Kisco 10549-2217 Amount of Each Receipt this Period FEC ID number of contributing 30.42 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 530.42 Other (specify) Full Name (Last, First, Middle Initial) B. Trond Stockenstrom Date of Receipt Mailing Address 208 Cecil St SE 17 12 2014 City State Zip Code Transaction ID: 2AC5495C-86FD-4C42-8 MN Minneapolis 55414-3613 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 274.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cameron Stone Date of Receipt Mailing Address 21 Medical Park Dr 15 2014 City Zip Code State Transaction ID: 1C4E3C27-8AD2-482F-8 NC Asheville 28803-2493 Amount of Each Receipt this Period FEC ID number of contributing 208.33 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1874.97 Other (specify) 313.75 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Prem Subramanian Date of Receipt Mailing Address 500 Dartmouth Ave 30 2014 City Zip Code State Transaction ID: AC26FC76-DBB8-483F-9 MD Silver Spring 20910-4261 Amount of Each Receipt this Period FEC ID number of contributing C 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Prem Subramanian Date of Receipt Mailing Address 500 Dartmouth Ave 12 31 2014 City State Zip Code Transaction ID: 744B7531-48CE-4B60-9 MD Silver Spring 20910-4261 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Frank Terrell Date of Receipt Mailing Address PO Box 1317 05 2014 City Zip Code State Transaction ID: CA1327BA-0CE7-4F12-9 Stephenville TX 76401 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 333.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any phe name and address of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophtha	Ilmology Inc Political Committee (	(OPHTHPAC)
Full Name (Last, First, Middle Initial)  Miguel Torres  Mailing Address 2225 Ponce By Pass Suite and City Ponce  FEC ID number of contributing federal political committee.  Name of Employer  Self Receipt For:  Primary Other (specify)   General  Other (specify)	State Zip Code PR 00717  C  Occupation Ophthalmologist  Aggregate Year-to-Date  250.02	Date of Receipt  12 15 2014  Transaction ID: 48820B83-8E05-48E3-B  Amount of Each Receipt this Period  41.67
Full Name (Last, First, Middle Initial)  Kevin Treacy  Mailing Address 645 Ridgewood Rd  City  Duluth  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary  General  Other (specify)	State Zip Code MN 55804-1856  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  250.00	Date of Receipt  12 17 2014  Transaction ID: D365FD04-5697-47BB-B  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Michael Versackas  Mailing Address 1212 Pleasant St Ste 202  City  Des Moines  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  General  Other (specify)	State Zip Code IA 50309-1411  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼  250.00	Date of Receipt  12 19 2014  Transaction ID: 867ADC84-7908-45A7-8  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional).		541.67
TOTAL This Period (last page this line number	er orny)	

#### SCHEDULE A (FEC Form 3X) 17

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Stat or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmo	ology Inc Political Committee	(OPHTHPAC)
Self Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	State Zip Code ND 58504-5675  C  Occupation Ophthalmologist Aggregate Year-to-Date ▼	Date of Receipt  12 05 2014  Transaction ID: 2CE0923F-5198-4B2F-B  Amount of Each Receipt this Period  1000.00
Self	State Zip Code VA 23462-6541  C  Occupation  Ophthalmologist  Aggregate Year-to-Date ▼  666.64	Date of Receipt  11 30 2014  Transaction ID: 4561036B-6337-4E87-9  Amount of Each Receipt this Period  83.33
Self	State Zip Code FL 33155-4069  C  Occupation Ophthalmologist  Aggregate Year-to-Date ▼	Date of Receipt  12 15 2014  Transaction ID: 4A6F3DA7-9E6B-45C5-9  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number on		<u> </u>

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Aaron Weingeist Date of Receipt Mailing Address 4717 53rd Ave S 2014 City Zip Code State Transaction ID: F38546DE-C855-478C-9 WA Seattle 98118-1640 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1033.33 Other (specify) Full Name (Last, First, Middle Initial) B. Tay Weinman Date of Receipt Mailing Address 571 West 7th St 12 31 2014 City State Zip Code Transaction ID: 3250917A-647F-4090-8 CA San Pedro 90731-3115 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 833.36 Other (specify) Full Name (Last, First, Middle Initial) **c.** Floyd Wergeland Jr. Date of Receipt Mailing Address 3425 Malpazo Ct 80 2014 City Zip Code State Transaction ID: 00EEC40C-8D1E-45CA-8 CA Bonita 91902-1221 Amount of Each Receipt this Period FEC ID number of contributing C 175.00 federal political committee.

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425.00

Occupation

ophthalmologist

Aggregate Year-to-Date ▼

Name of Employer

Primary

Other (specify)

General

self

Receipt For:

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Matthew Wheatley Date of Receipt Mailing Address 924 Highland Ave 2014 City Zip Code State Transaction ID: 75D45C0C-BADA-475C-8 Westfield NJ 07090-3074 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Wheeler Date of Receipt Mailing Address 4035 Mercantile Drive Suite 201 12 04 2014 City State Zip Code Transaction ID: 301DD0FA-5752-4B67-B OR Lake Oswego 97035 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stewart White Date of Receipt Mailing Address 149 Lakeside Boulevard 04 2014 City State Zip Code Transaction ID: 7F822960-CF2E-489F-8 MT Lakeside 59922-9701 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation self ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 43 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Kirk Winward Date of Receipt Mailing Address 5169 Cottonwood St, Ste 630 2014 0.3 City Zip Code State Transaction ID: A991811F-D3E8-461E-9 UT Salt Lake City 84107-6771 Amount of Each Receipt this Period FEC ID number of contributing 199.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 398.00 Other (specify) Full Name (Last, First, Middle Initial) B. Harold Woodcome Date of Receipt Mailing Address 690 Eddy Street 12 02 2014 City State Zip Code Transaction ID: B2571398-9454-4A65-A Providence RΙ 02903 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. George Wyhinny Date of Receipt Mailing Address 8901 Golf Rd Ste 206 15 2014 City State Zip Code Transaction ID: F0DEEDC8-90D1-40DE-B IL Des Plaines 60016-6850 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 865.00 Other (specify) 1064.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 44 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c **Detailed Summary Page** 

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Timothy Young Date of Receipt Mailing Address 5300 North St 2014 City Zip Code State Transaction ID: EB5D7BA1-E471-4ED3-9 Nacogdoches TX 75965-1370 Amount of Each Receipt this Period FEC ID number of contributing C 30.42 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 273.78 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 30.42 SUBTOTAL of Receipts This Page (optional)..... 24521.78 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)	11	, FOR LIN	LINE NUMBER: PAGE 45									
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oncor or		☐ 23 ☐	 7							
	Detailed Summary Page	X 211	b 22 28a	23 28b	24 25 28c 29	26 30b						
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or for commercial purposes, other than using the nan	ne and address of any polit	ical committee	to solicit co	ntributions fro	om such commit	tee.						
NAME OF COMMITTEE (In Full)  American Academy of Ophthalmology	nay Inc Political Co	mmittee ((	ЭРНТНЕ	2ΔC)								
	bgy fric i diffical Co	minitee (C	JI 1111111	ΑΟ)								
Full Name (Last, First, Middle Initial)			Date of	f Disburseme	ant							
A. Wells Fargo Bank N.A.			Date 0	/ D D	/ Y Y Y Y	V						
Mailing Address PO Box 63020			11 30 2014									
City	State Zip Code		Trons	estion ID - 2	00 A 27 D 2004 E 20	1040EE						
San Francisco Purpose of Disbursement	CA 94163	ı	Irans	saction ID : 2	20A27D3091F281	1812EF						
Bank charges - Nov 2014		001	Amoun	t of Each Dis	sbursement this	Period						
Candidate Name		Category/										
		Туре		7	82	2.70						
Office Sought: House Disburser Senate	nent For:  Primary General											
President	Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial)												
B. Wells Fargo Bank N.A.			Date of	f Disburseme	ent							
Mailing Address PO Box 63020			12	31	2014	Y						
	State Zip Code CA 94163		Trans	saction ID: 7	7FF7D70BC0871	77017B						
San Francisco Purpose of Disbursement	94163											
Bank charges - Dec 2014		001	Amoun	t of Each Dis	sbursement this	Period						
Candidate Name		Category/			5	9.92						
Office Sought: House Disburser	nent For:	Туре	_	,								
Senate	Primary General											
President	Other (specify) ▼											
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Full Name (Last, First, Middle Initial)  C.			Date of	f Disburseme	ant							
<b>o.</b>			M M	/ D D	/ <b>Y Y Y</b>	Y						
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City	State Zip Code											
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					sbursement this	Period						
Candidate Name		Category/ Type										
Office Sought: House Disburser	ment For:	1,750	-	7								
Senate	Primary General											
President District:	Other (specify) ▼											
State: District:												
SUBTOTAL of Disbursements This Page (optional)					142	2.62						
			-	- 1								
TOTAL This Period (last page this line number only)					142	2.62						

SCHEDULE B (FEC Form 3X)	Use separate	schedule(s)	FOR LINE N			PAGE	46 O	F 47
ITEMIZED DISBURSEMENTS	for each cated Detailed Sumi	gory of the	(check only 21b 27		X 23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan								
NAME OF COMMITTEE (In Full)  American Academy of Ophthalmology						. 5 54611	Julian	<u>.                                    </u>
Full Name (Last, First, Middle Initial)				_				
A. Charlie Dent for Congress					Disbursem			
Mailing Address PO Box 442				12	02		2014	Y .
,		Code		Transa	action ID :	94958CEB	2DD1D4	70CCD
Allentown Purpose of Disbursement	PA 18	105						
Check was still outstanding. Voided check #11217-	4		011	Amount	of Each D	isbursemer	nt this Po	eriod
Candidate Name			Category/				-2500.0	00
Charles W. Dent Office Sought:	ment For: 2014		Туре		- 7	7	2000.	
Senate President		General ▼						
State: PA District: 15  Full Name (Last, First, Middle Initial)								
B. Tenn Political Action Committee In	c (TENN P	AC)		Date of	Disbursem		Y	v
Mailing Address 228 S Washington Street Suite 11				12	09		2014	
City S Alexandria		Code 314		Transa	action ID :	ECE4B9B	BFF3EA2	2BE87F
Purpose of Disbursement	VA 22	314						
2014 Contribution			011	Amount	of Each D	isbursemer	nt this Po	eriod
Candidate Name  Tonn Political Action Committee In	o /TENNI D	۸۵) ا	Category/				1000.	00
Senate	ment For: 2014 Primary Other (specify)	General	Туре					
Full Name (Last, First, Middle Initial)  C. Upton for All of Us				Date of	Disbursem	ent		
Mailing Address PO Box 490				12	09		2014	Y
St. Joseph		Code 085		Transa	action ID :	608143A5I	EE8DB2	7BD37
Purpose of Disbursement 2014 General Debt Retirement			011	Amount	of Each D	isbursemer	nt this Po	eriod
Candidate Name Fredrick Stephen Upton			Category/				5000.0	00
•	ment For: 2014 Primary Other (specify)	General ▼	Туре		7	7		
SUBTOTAL of Disbursements This Page (optional)				Γ.			3500.0	00
TOTAL This Period (last page this line number only)							1 7	Ħ

tor each category of the path	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 47 OF 47
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Pull)  American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Mame (Last, First, Middle Initial)  A. Voice for Freedom  Mailing Address 2700 Cumberland Parkway, Suite 150  City  State  Sanata  Pripose of Disbursement  State:  Disbursement For: 2014  City  State:  Sanata  Primary  General  Primary  General  Transaction ID: FS3AC1DD3210FB228c1  Amount of Each Disbursement  12 03 2014  Amount of Each Disbursement  12 03 2014  Amount of Each Disbursement  12 03 2014  Date of Disbursement  Transaction ID: FS3AC1DD3210FB228c1  Amount of Each Disbursement  12 03 2014  Amount of Each Disbursement  12 03 2014  Transaction ID: 91970BF8311B160B4EF  Amount of Each Disbursement  12 03 2014  Transaction ID: 91970BF8311B160B4EF  Amount of Each Disbursement this Period  Category'  Type  Office Sought:  Mailing Address  City  State:  City  Candidate Name  Candidate Name  City  Ca	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 🗙 23	
AMAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Name (Last, First, Middle Initial)  A. Voice for Freedom  Mailing Address 2700 Cumberland Parkway, Suite 150  City  State  GA  30339  Purpose of Disbursement  2014 Contribution  Candidate Name  Voice for Freedom  Office Sought:  House  Primary  Senate Primary  Other (specify)  Propose of Disbursement  2016 Contribution  City Hood River  Purpose of Disbursement  2016 Ceneral  Purpose of Disbursement  Cardidate Name  Category'  Office Sought:  Senate Primary  Category'  Office Sought:  Senate Primary  Category'  Office Sought:  Senate Primary  Category'  Transaction ID: 91970BF8311B160B4EF  Amount of Each Disbursement this Period  Category'  2500.00  Full Name (Last, First, Middle Initial)  Category'  City  State  Zip Code Purpose of Disbursement  Category'  Office Sought:  House Primary  General Primary  General Primary  Category'  Type  Amount of Each Disbursement this Period  Category'  Type  Office Sought:  House Purpose of Disbursement  Category'  Office Sought:  Primary  General Primary  General  Primary  General  Primary  General  Primary  General  Primary  General  Primary  General  Primary  Category'  Type  Amount of Each Disbursement this Period  Category'  Type  Office Sought:  Primary  General  Primary  Gen					
A. Voice for Freedom  Mailing Address 2700 Cumberland Parkway, Suite 150  City State Zip Code GA 30339  Purpose of Disbursement 2014 Contribution  Candidate Name  Voice for Freedom  Office Sought: House President State: District: Contribution  City State Zip Code Primary General Primary 2500.00  Date of Disbursement this Period  Category/ Transaction ID : F53AC1DD3219FB228C1  Amount of Each Disbursement this Period  Category/ 2500.00  Date of Disbursement this Period  Category/ 2500.00  Transaction ID : F53AC1DD3219FB228C1  Amount of Each Disbursement this Period  Category/ 2500.00  Transaction ID : F53AC1DD3219FB228C1  Amount of Each Disbursement this Period  Category/ 2500.00  Transaction ID : F53AC1DD3219FB228C1  Amount of Each Disbursement this Period  Category/ 2500.00  Transaction ID : 91970BF8311B160B4EF  Purpose of Disbursement This Period  Category/ 2500.00  Transaction ID : 91970BF8311B160B4EF  President Other (specity) ▼  Category/ 2500.00  Category/ 2500.00  Category/ 2500.00  Category/ 2500.00  Date of Disbursement this Period  Category/ 2500.00	NAME OF COMMITTEE (In Full) American Academy of Ophthalmolo	•			on con comme
City State Zip Code Atlanta GA 30339  Purpose of Disbursement Zitale: Senate President Zitale: OR Disbursement Zitale: OR Disbursement Candidate Name  City State Zip Code GA 30339  Transaction ID : F53AC1D03210FB228C1  Amount of Each Disbursement this Period  Category/ Category/ Type  Date of Disbursement  25 General President State: Zip Code Office Sought: House OR 97031-0037  Purpose of Disbursement Zitale: OR Disbursement For: 2016  State: Disbursement Category/ Type  Primary General Primary General Primary General Primary General President State: Disbursement Category/ Type  Date of Disbursement  26 General Category/ Type  Date of Disbursement Disbursement For: 2016  Transaction ID : 91970BF3311B160B4EF  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement Disbursement For: 2016  Category/ Type  Primary General Category/ Type  Cother (specify) ▼  Date of Disbursement this Period  Category/ Category/ Type  Date of Disbursement this Period  Category/ Category/ Category/ Type  Primary General Category/ Type  Date of Disbursement this Period  Category/ Category/ Disbursement For: 2016  Date of Disbursement Amount of Each Disbursement this Period  Category/ Category/ Category/ Type  Date of Disbursement Disbursement For: 2016  Date of Disbursement Disbursement For: 2016  Category/ Category/ Category/ Type  Date of Disbursement Disbursement For: 2016  Date of Disbursement Disbursement For: 2016  Category/ Category/ Disbursement Disbursement For: 2016  Date of Disbursement Disbursement For: 2016  Date of Disbursement Disbursement Disbursement For: 2016  Date of Disbursement Disbursement For: 2016  Date of Disbursement Disbursement Disbursement For: 2016  Date of Disbursement Disbursement Disbursement For: 2016  Date of Disbursement D	,			Date of Disbursem	ent
Atlanta GA 30339 Purpose of Disbursement 2014 Contribution  Candidate Name  Voice for Freedom  Office Sought: House President State: Disbursement For: 2014 Primary General Primary General Propose of Disbursement  State: Disbursement For: 2016 Primary General Other (specify) ▼  State: Disbursement Disbursement For: 2016  Mailing Address  City State Zip Code Primary General Primary General Primary General Other (specify) ▼  Date of Disbursement this Period Disbursement For: 2016  Amount of Each Disbursement This Period Disbursement This Period Other (specify) ▼  State: Disbursement For: General Other (specify) ▼  State: Disbursement For: General Other (specify) ▼  Substate: Disbursement For: General Other (specify) ▼  State: Disbursement For: General Other (specify) ▼  Substate: Disbursement For: General Other (specify) ▼		50		M M / D D	/ Y Y Y Y Y
Atlanta GA 30339 Purpose of Disbursement 2014 Contribution  Candidate Name  Voice for Freedom  Office Sought: House President State: Disbursement For: 2014 Primary General Primary General Propose of Disbursement  State: Disbursement For: 2016 Primary General Other (specify) ▼  State: Disbursement Disbursement For: 2016  Mailing Address  City State Zip Code Primary General Primary General Primary General Other (specify) ▼  Date of Disbursement this Period Disbursement For: 2016  Amount of Each Disbursement This Period Disbursement This Period Other (specify) ▼  State: Disbursement For: General Other (specify) ▼  State: Disbursement For: General Other (specify) ▼  Substate: Disbursement For: General Other (specify) ▼  State: Disbursement For: General Other (specify) ▼  Substate: Disbursement For: General Other (specify) ▼	City	State Zin Code			
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Voice for Freedom  Office Sought: House Senate President State: Disbursement For: 2014  Full Name (Last, First, Middle Initial)  B. Walden for Congress  Mailing Address PO Box 1091  City State Zip Code OR 97031-0037  Purpose of Disbursement Candidate Name Gregory P. Walden  Office Sought: Senate Primary General Primary Amount of Each Disbursement Tor: 2018  Sanate President Other (specify) ▼  State Zip Code  Office Sought: Sonate Primary General Primary Amount of Each Disbursement this Period  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: President Other (specify) ▼  State: Disbursement For: 2018  Category/ Type  Office Sought: House Disbursement For: 2018  Category/ Type  Office Sought: House Disbursement For: 2018  Category/ Type  Office Sought: House Disbursement For: 2018  State: Disbursement For: 2018  State: Disbursement For: 2018  State: Disbursement For: 2018  State: Disbursement For: 2018  Amount of Each Disbursement this Period  Amount of Each Disbursement This Period  State: Disbursement For: 2018  Substate:	2014 Contribution		011	Amount of Each D	isbursement this Period
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Mailing Address PO Box 1091  City State Zip Code Hood River OR 97031-0037 Purpose of Disbursement 2016 General Candidate Name Gregory P. Walden  Office Sought: House President President Candidate Name  City State Zip Code Other (specify) ▼  Disbursement For: 2016  State: OR District: O2  Disbursement For: 2016  Category/ Type  Office Sought: House President Category/ Type  Office Sought: House Senate Primary General Primary General Category/ Type  Office Sought: House Senate President State: Disbursement For: Primary General President State: Disbursement For: Primary General President State: Disbursement This Page (optional)	Office Sought:    House   Disburser	Primary General Other (specify) ▼	Турс		
Mailing Address PO Box 1091  City State Zip Code OR 97031-0037  Purpose of Disbursement 2016 General Candidate Name Candidate Name Candidate Name Office Sought: Senate President Candidate Name Office Sought: Senate Primary General Other (specify) ✓  State: OR District: O2  Date of Disbursement This Period Other (specify) ✓  Amount of Each Disbursement this Period Category/Type Office Sought: House Senate Primary General Other (specify) ✓  State: District: District: Senate Primary General Other (specify) ✓  SUBTOTAL of Disbursements This Page (optional)	_				
Mailing Address PO Box 1091	B. Walden for Congress				
Hood River OR 97031-0037 Purpose of Disbursement 2016 General  Candidate Name  Gregory P. Walden  Office Sought: House Senate Primary Other (specify) ▼  City State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District: Other (specify) ▼  State: District: Disbursement For: Senate Primary General Other (specify) ▼  Substitute: District: Other (specify) ▼  Substitute: Other (specify) ▼  Amount of Each Disbursement this Period	Mailing Address PO Box 1091				
Candidate Name  Gregory P. Walden  Office Sought:	Hood River	·		Transaction ID :	91970BF8311B160B4EF
Gregory P. Walden  Office Sought: House Senate President State: OR District: 02  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Office Senate Primary General Other (specify) Type  Office Sought: House Office Senate Primary General Other (specify) Type  State: District:  Substitute Office Sought: Senate Primary General Other (specify) Type  Substitute Other (specify) Type  Substi			011	Amount of Each D	isbursement this Period
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